Application or Docket Number

PATENT APPLICATION FEE. DETERMINATION RECORD

Effective October 1, 2000

			SMALL ENTITY			OTHER THAN						
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE		OR I I	SMALL	
TOTAL CLAIIVIS							-	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	\cup \cap	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			214 minus 20=		*	92	 >	(\$ 9=		OR	り り X\$18=	396,
INDEPENDENT CLAIMS			minus 3 =		*	2	>	K 40=		OR	£x80=	160.
MULTIPLE DEPENDENT CLAIM PRESENT							+	135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	T	OTAL		OR	TOTAL.	1266-
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
(Column 1) (Column 2) (Column 3)								MALL	ENTITY	OR	SMALL	
AMENDMENT A	* 10	CLAIMS REMAINING AFTER AMENDMENT	4	NUM PREVI		PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T CL AIM	=	>	< 40=		OR	X80=	
-	FINST PRESE	NIATION OF W	OLTIPLE DEP)	CLAIN		+	135=		OR	+270=	
							405	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)							лі, ғ с с і		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B	* *	CLAIMS REMAINING AFTER AMENDMENT	11.	HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		=	\downarrow	< 40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105			1270-	
								135=		OR	+270= TOTAL	
							ADE	TOTAL DIT. FEE		OR	ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	(\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T 01 411		\rightarrow	(40=		OR	X80=	
	FIRST PRESE	NIATION OF M	OLTIPLE DEF	DEPENDENT CLAIN				135=			+270=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												